CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

Please type or print in ink.

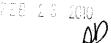
STATEMENT OF ECONOMIC INTERESTS

Date Received Official Use Only

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2010 FEB 24 AM 10: 58

A Public Document



| NAME | (LAST) | CAY | (FIRST) | (MIDDL | E) | DAYTIME TELEPHONE NUMBER | |
|-------------------------------------------|---------------------------------|----------------------------------------|---------------------------------------------------------------|----------------------------------|--------------------------------------|---------------------------------------------------------------|--|
| WIG | GINS | | PATRICIA | | | | |
| MAILIN | | STREET | CITY | STATE | ZIP CODE | OPTIONAL: E-MAIL ADDRESS | |
| COUSTIC | ess Audress Acceptable | | | | | | |
| | , - N | | | | 7 | | |
| 1. C | Office, Agenc | y, or Court | | 4. Schedul | e Summar | У | |
| Name of Office, Agency, or Court: | | | | ➤ Total numb | | | |
| CA | STATE SENAT | E | | including th | is cover page | 5: | |
| Division, Board, District, if applicable: | | | | cable schedul | es or "No reportable | | |
| DISTRICT 02 | | | interests." I have disclosed interests on one or more of the | | | | |
| Your Position: | | | attached schedules: | | | | |
| SE | NATOR | | | Schedule A- | 1 □ Yes – s | chedule attached | |
| | | positions, list additi | | | ess than 10% Own | | |
| | position(s): (Attac | ch a separate sheet | ir necessary.) | Schedule A- | 2 ⊠ Yes – s | chedule attached | |
| Age | ency: | · | | Investments (| 10% or Greater Own | tership) | |
| | | • | | Schedule B | 🔀 Yes – s | chedule attached | |
| Pos | sition: | | | Real Property | | | |
| | | | | Schedule C | | chedule attached | |
| 2. J | urisdiction o | f Office (Check | at teast one box) | income, Loan. and Travel Paym | | OSITIONS (Income Omer man Gifts | |
| | State | | | Schedule D | Schedule D X Yes - schedule attached | | |
| | County of | | | Income – Gift | S | | |
| | City of | | | Schedule E | Yes - s | chedule attached | |
| | Multi-County | ************************************** | | Income – Gifts – Travel Payments | | | |
| | Other | | | | -or- | - | |
| | | | ······································ | No report | able interests | on any schedule | |
| 3. T | ype of Stater | ment (Check at | least one box) | | | | |
| | Assuming Office/Ir | nitial Date: | | | | | |
| | Annual: The neric | od covered is Janua | ญ 1 2009 | 5. Verification | on | | |
| *************************************** | through December | | iy 1, 2000, | | | diligence in preparing this | |
| | | -or- | | f 1 | | this statement and to the best on contained herein and in any | |
| (| | ered is | , through | attached sched | ules is true an | d complete. | |
| | December 31, 2 | | | | enalty of perju | ıry under the laws of the State | |
| | Leaving Office D (Check one) | Pate Left:/ | J., | of California t | nat the forego | ing is true and correct. | |
| (| • | ered is January 1, 2 | 2009, through the | | Les los. | uara 20,2010 | |
| | date of leaving | onice. | | Date Signed _ | r vyit | (month, of, year) | |
| (| O The period cove | ered is/ | through | | | | |
| ` | the date of leav | | | Signature | le the anginally sign | eu saggrein win your filing official.) | |
| П (| Candidate Elect | ion Year: | | | | 00 | |

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name
WIGGINS

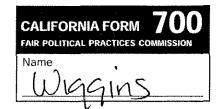
| ► 1. BUSINESS ENTITY OR TRUST | ► 1. BUSINESS ENTITY OR TRUST |
|--------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|
| buy Conner Professional SVCS | |
| Guy Conner Professional SVCS 1275 Th 386 Janja Rosa, 95404 | Name |
| Address (Business Address Acceptable) | Address (Business Address Acceptable) |
| Check one Trust, go to 2 Business Entity, complete the box, then go to 2 | Check one Trust, go to 2 Business Entity, complete the box, then go to 2 |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY POlitical (MSulfin) | GENERAL DESCRIPTION OF BUSINESS ACTIVITY |
| FAIR MARKET VALUE IF APPLICABLE, LIST DATE: | FAIR MARKET VALUE IF APPLICABLE, LIST DATE: |
| \$2,000 - \$10,000 \$10,001 - \$100,000 | \$2,000 - \$10,000 \$10,001 - \$100,000// |
| S100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000 | S100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000 |
| NATURE OF INVESTMENT | NATURE OF INVESTMENT |
| Sote Proprietorship Partnership Onher YOUR BUSINESS POSITION DOUSE | Sole Proprietorship Partnership Other |
| YOUR BUSINESS POSITION X DUSE | YOUR BUSINESS POSITION |
| ► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>10</u> THE ENTITY/TRUST) | ➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>10</u> THE ENTITY/TRUST) |
| ☐ \$0 - \$499 ☐ \$10,001 - \$100,000 | \$0 - \$499 |
| ☐ \$500 - \$1,000 ☐ OVER \$100,000 ☐ \$1,001 - \$10,000 | S500 - \$1,000 OVER \$100,000 |
| ➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (attach a separate sheet if necessary) | ▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF |
| INCOME OF \$10,000 OR MORE (attach a separate sheet if necessary) | INCOME OF \$10,000 OR MORE (attach a separate sheet if necessary) |
| | |
| | |
| ▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST | ▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST |
| Check one box: | Check one box: |
| NVESTMENT REAL PROPERTY | INVESTMENT REAL PROPERTY |
| Name of Business Entity or | Name of Business Entity or |
| Street Address or Assessor's Parcet Number of Reat Property | Street Address or Assessor's Parcet Number of Real Property |
| | |
| Description of Business Activity or | Description of Business Activity or |
| City or Other Precise Location of Real Property | City or Other Precise Location of Real Property |
| FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 | FAIR MARKET VALUE IF APPLICABLE, LIST DATE: |
| \$10,001 - \$100,000 | |
| Over \$1,000,000 | Over \$1,000,000 |
| NATURE OF INTEREST | NATURE OF INTEREST |
| Property Ownership/Deed of Trust Stock Partnership | Property OwnershiptDeed of Trust Stock Partnership |
| Leasehold Other Other | Leasehold Other |
| Check box it additional schedules reporting investments or real property are attached | Check box it additional schedules reporting investments or real property are attached |
| Comments: | FPPC Form 700 (2009/2010) Sch. A-2 |

SCHEDULE B Interests in Real Property (Including Rental Income)

| CALIFORNIA FORM 7(FAIR POLITICAL PRACTICES COMMISS | |
|-----------------------------------------------------|--|
| Name Wiggins | |

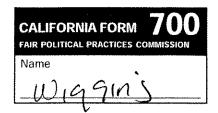
| CITY Santa Rosa, CA 95401 FAIR MARKET VALUE | ► STREET ADDRESS OR PRECISE LOCATION | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CITY Santa Rosa, CA 95401 FAIR MARKET VALUE | Commission and include processing | ► STREET ADDRESS OR PRECISE LOCATION |
| CITY Santa Rosa, CA 95401 FAIR MARKET VALUE | 315 Carillo St | |
| FAIR MARKET VALUE IF APPLICABLE, LIST DATE: S2,000 - \$10,000 | CITY | CITY |
| FAIR MARKET VALUE IF APPLICABLE, LIST DATE: | Santa Rosa, CA 95401 | |
| | FAIR MARKET VALUE IF APPLICABLE, LIST DATE: | \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 ACQUIRED DISPOSED |
| | NATURE OF INTEREST | NATURE OF INTEREST |
| 11 | , · · · · · · · · · · · · · · · · · · · | |
| Leasehold Cther Leasehold Cther Cther | Leasehold | Leasehold Yrs. remaining Other |
| | IF RENTAL PROPERTY, GROSS INCOME RECEIVED | IF RENTAL PROPERTY, GROSS INCOME RECEIVED |
| F RENTAL PROPERTY, GROSS INCOME RECEIVED IF RENTAL PROPERTY, GROSS INCOME RECEIVED | T\$0 - \$499 T\$500 - \$1,000 T\$1,001 - \$10,000 | S0 - \$499 |
| | S10,001 - \$100,000 OVER \$100,000 | S10,001 - \$100,000 OVER \$100,000 |
| \$0 - \$499 | SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each lenant that is a single source of income of \$10.000 or more. Thus is source? | SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more. |
| \$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000 \$51,001 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$100,000 \$10,001 - \$100,000 \$10,001 - \$100,000 \$10,001 - \$100,000 \$10,001 - \$100,000 \$10,001 - \$100,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 | claimed for business purposes | |
| SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each lenant that is a single source of income of \$10,000 or more. This is prairing how in a purposer Claimed for business purposer | , | |
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| \$0 - \$499 | name of Lender's Acceptable of Mortgage Address Address Acceptable) Business Activity, If Any, of Lender Banky | lic without regard to your official status. Personal loans business must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER |
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| SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more. This is prime plurps. Tour are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows: NAME OF LENDER. | of business on terms available to members of the put and loans received not in a lender's regular course of NAME OF LENDER. Nationsky Mortgasy ADDRESS (Business Address Acceptable) 350 lfigh land Drive hewisville, BUSINESS ACTIVITY, IF ANY, OF LENDER Banky INTEREST RATE TERM (Months/Years) | lic without regard to your official status. Personal loans business must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) |
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| SO - \$499 | of business on terms available to members of the put and loans received not in a lender's regular course of NAME OF LENDER* Nation Star Mortgage ADDRESS (Business Address Acceptable) 350 High Kend Drive hewisville, BUSINESS ACTIVITY, IF ANY, OF LENDER 75047 BUSINESS RATE L.35% None None MIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$1,001 - \$100,000 | lic without regard to your official status. Personal loans business must be disclosed as follows: NAME OF LENDER* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) |
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| I # | NATURE OF INTEREST Ownership/Deed of Trust Easement | |
| | \$10,001 - \$100,000 | \$10,001 - \$100,000 |
| \$10,001 - \$100,000 | | FAIR MARKET VALUE IF APPLICABLE, LIST DATE: |
| FAIR MARKET VALUE IF APPLICABLE, LIST DATE: S2,000 - \$10,000 | | |
| Santa Rosa, CA 95401 FAIR MARKET VALUE IF APPLICABLE, LIST DATE: | | CITY |
| CITY Santa Rosa, CA 95401 FAIR MARKET VALUE | | ► STREET ADDRESS OR PRECISE LOCATION |
| \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000 NATURE OF INTEREST \$2,000 - \$10,000 \$10,001 - \$10,000 \$10,001 - \$1,000,000 ACQUIRED DISPOSE Over \$1,000,000 NATURE OF INTEREST | 315 Carillo St CITY Santa Rosa, CA 95401 | CITY |

SCHEDULE D Income - Gifts



| NAME OF SOURCE | ► NAME OF SOURCE |
|------------------------------------------------------------------------|----------------------------------------------------------------------|
| CA Forestry Assn | Lymner ASSn of CA + Nev ADDRESS (Business Acceptable) |
| ADDRESS (Business Address Acceptable) | ADDRESS (Business Address Acceptable) |
| 1215 16 = 1830 Sac, Ch 95814 BUSINESS ACTIVITY, IF ANY, OF SOURCE | 1215 C # 1830, Sac, Ca 95814 BUSINESS ACTIVITY, IF ANY, OF SOURCE |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE | BUSINESS ACTIVITY, IF ANY, OF SOURCE |
| DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) | DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) |
| 3,25 09,22.93 Recephia | 3,25,5 ,22,93 reception |
| s | |
| | |
| NAME OF SOURCE | NAME OF SOURCE |
| ADDRESS (Business Address Acceptable) | ADDRESS (Business Address Acceptable) |
| 50 Francisco Illo San Francisa | |
| BUSINESS ACTIVITY, IF ANY. OF SOURCE | BUSINESS ACTIVITY, IF ANY, OF SOURCE |
| DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) | DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) |
| 3,7309 :25.06 receptor | 3,17,09 :60.05 Mception |
| | s |
| s | |
| ► NAME OF SOURCE | NAME OF SOURCE |
| rech America | ADDRESS (Business Address Acceptable) |
| ADDRESS (Businèss Address Acceptable) | |
| 1215 K + 2140 Savramen 10, Cor BUSINESS ACTIVITY, IF ANY, OF SOURCE | POBOX 8542, LOSANZUS, CA 90008 BUSINESS ACTIVITY, IF ANY, OF SOURCE |
| 9389 | |
| DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) | DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) |
| 51309:10 Charlate Comple | 615.09 \$ 62.00 giftbardwines sks |
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| 1 ! | |
| • | |
| | |
| Comments: | |
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SCHEDULE D Income - Gifts



| NAME OF SOURCE WA State Employees ASS. ADDRESS (Business Address Acceptable) NOX OST, Sucramenty Ca 95814 BUSINESS ACTIVITY, IF ANY, OF SOURCE | Stanbag & Senate 2010 ADDRESS (Business Address Acceptable) 1100 O Stanbag Sac, aa 95814 BUSINESS ACTIVITY, IF ANY, OF SOURCE |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|
| DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 3,17-09,14-01 1Ce Class | DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 6, 3, 09, 38.48 dinner 3, 3, 09, 571.23 dinner |
| NAME OF SOURCE | |
| NAME OF SOURCE Whe Just Fut ADDRESS (Business Address Acceptable) 425 Market St Toov San Fancisco BUSINESS ACTIVITY, IF ANY, OF SOURCE CA 94105 | NAME OF SOURCE ADDRESS (Business Address Accellable) 265 Hogen beyon Officer GUVZ BUSINESS ACTIVITY, IF ANY, OF SOURCE GUVZ |
| DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 3/9/09 \$59.11 WWL reaphin | DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 12/11/09 s 40 Lunch |
| | \$ |
| NAME OF SOURCE | NAME OF SOURCE |
| ADDRESS (Business Address Acceptable) | ADDRESS (Business Address Acceptable) |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE | BUSINESS ACTIVITY, IF ANY, OF SOURCE |
| DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) | DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) |
| | |
| s | |
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| Comments: | |